PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandra 2005

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further cindicated unless correcte maintenance fee notificat	correspondence including below or directed oth	or transmitting the ISS g the Patent, advance erwise in Block 1, by	(a) specifying a new corr	respondence address	; and/or	(b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDE		Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
26748		Cor	rtificata i	of Mailing or Transn	nission			
SYNGENTA C PATENT AND T 410 SWING RO	I I St ac tra	I hereby certify that this Fee(s) Transmitt States Postal Service with sufficient posta addressed to the Mail Stop ISSUE FEI transmitted to the USPTO (571) 273-2885			deposited with the United class mail in an envelope above, or being facsimile te indicated below.			
GREENSBORO	, NC 27409	1	Dawn L., Royal			(Depositor's name)		
			7	& J. /	luse	_	(Signature)	
			N	ovember 30,	2006	5	(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTO	TOR ATTORNEY DOCKET NO		RNEY DOCKET NO.	CONFIRMATION NO.	
10/522,077 01/21/2005			Clemens Lamberth "70102			6904		
TITLE OF INVENTION	: N-BISARYL- AND N	I-ARYL-CYLCLOAKY				LKOXY ACID AMII		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	JE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	11/30/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	(SS				
KUMAR, SHAILENDRA		1621	564-184000					
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a					
 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 								
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address 2 or more recent) attach	" Indication form acd. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Syngenta Crop Protection, Inc. Greensboro, North Carolina								
Please check the appropr	iate assignee category or	categories (will not be	printed on the patent):	☐ Individual 【XC	Corporati	on or other private gro	up entity Government	
4a. The following fec(s)			4b. Payment of Fee(s): (P					
XX Issue Fee		A check is enclosed.						
Publication Fee (No small entity discount permitted)			■ The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any					
Advance Order - # of Copies			overpayment, to De	overpayment, to Deposit Account Number(enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicate as SMALL ENTITY stat		☐ b. Applicant is no	longer claiming SMA	ALL ENT	ΓΙΤΥ status. See 37 CI	FR 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if rec	uired) will not be accer	ted from anyone other tha				e assignee or other party in	
	Willen G.			Date 4/	129/	06		
Typed or printed nam	William A.	Teoli, Jr.		Registration	No	33,104		
This collection of inform an application. Confiden	nation is required by 37 (stiality is governed by 35 d application form to the	CFR 1.311. The informa 5 U.S.C. 122 and 37 CF c USPTO. Time will vi	ation is required to obtain R 1.14. This collection is ary depending upon the in				I by the USPTO to process) g gathering, preparing, and ne you require to complete	

submitting the completed application form to the USP10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.